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FEE TRANSMITTAL FOR FY 2005  Applicant claims amail entity status. See 37 CFR 1.27  Applicant claims amail entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (\$) 910.00  Attorney Docket No. 0020-4976P  METHOD OF PAYMENT (check all that apply)    Charge fee(s) indicated below   Charge fee(s)   Cha	TRACE TO A 12/08/2004				pond to a collection			_	nuroi number.	
FEE TRANSMITTAL For FY 2005    Applicant claims small entity status. See 37 CFR 1.27   Art Unit   1615	ETIBLITY OF 12/00/2004.				application Num					
For FY 2005    First Name Inventor   Akthiko SANO   Examiner Name   S. T. Tran   Atthiko SANO   Examiner Name   S. T. Tran   Applicant claims small entity status. See 37 CFR 1.27   At Unit   1615										
Applicant claims small entity status. See 37 CFR 1.27  Art Unit 1615  TOTAL AMOUNT OF PAYMENT (\$) 910.00 Attorney Docket No. 0020-4976P  METHOD OF PAYMENT (check all that apply)  X Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account, Number 02-2448 Deposit Account, Name: Birch, Stewart, Kolasch & Birch, LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Charge any additional fee(s) or underpayment of Indicated fee(s) under 37 CFR 1.16 and 1.17  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES SEARCH FEES EXAMINATION FEES  Application Type Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid						entor A	rihiko SANO			
METHOD OF PAYMENT (s) 910.00   Attorney Docket No.   0020-4976P	For FY 2005				xaminer Name	S	. T. Tran	r. Tran		
METHOD OF PAYMENT (check all that apply)    X   Check	Applicant claims small entity status. See 37 CFR 1.27				urt Unit	1	615			
X   Check   Credit Card   Money Order   None   Other (please identify):	TOTAL AMOUNT OF PAYMENT (\$) 910.00				ktomey Docket i	No. 0	)20-4976P			
Deposit Account Deposit Account Number 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge any additional fee(s) or underpayment of classified by the control of the filling fee control of	METHOD OF PAYMENT (check all that apply)									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge fee(s) indicated below  Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee fee(s) indicated below, except for the filling fee fee(s) indicated below, except for the filling fee fee(s) indicated below. except for fee(s) indicated below. except for fee fee fee(s) indicated below. except for fee(s) indicated below. except for the filling fee sunder feets) in the sunder filling feet fee(s) indicated below. except for feets in the filling feet feets in feets in the filling feet feets in feets in the filling feet feets in feet in the filling feet feet in feet in filling feet feets in feet in filling feet feet in filling feet feet in feet in fillin										
Charge fee(s) indicated below	Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
X   Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Tele(s) under 37 CFR 1.16 and 1.17	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Application Type										
Fil.ING FEES   Small Entity   Fee (\$)   Fee										
Application Type	1. BASIC FILING, SEARCH	I, AND EXA	MINATION FEES							
Application Type		FILIN		SEAF		EXAMIN		3		
Utility   300   150   500   250   200   100	Application Type	Fee (\$)		e (\$)		Fee (\$)		Fees Pa	id (\$)	
Plant										
Reissue   300   150   500   250   600   300	Design	200	100 1	00	50	130	65			
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Plant	200	100 3	00	150	160	80			
Small Entity   Fee (\$)   Fee (\$)	Reissue	300	150 5	00	250	600	300			
Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Superior of each additional 50 or fraction thereof fraction thereof fraction thereof fraction in the fee factor of the fee paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof fraction for response within first month  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge):  1801 Request for continued examination (RCE) (see 37 790.00  1251 Extension for response within first month  Registration No. (Altomey/Agent)	Provisional	200	100	0	0	0	0			
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Fee (\$)  Fee Paid (\$)  Sheets or fraction and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof fee (\$)  Fee Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00  1251 Extension for response within first month  Indep. Claims  Submitted By  Registration No. (Altomey/Agent)  Registration No. (Altomey/Agent)  Registration No. (Altomey/Agent)  Registration No. (Altomey/Agent)	2. EXCESS CLAIM FEES Small Entity									
Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fees Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00  1251 Extension for response within first month  Registration No. (Altomey/Agent)  Registration No. (Altomey/Agent)  Registration No. (Altomey/Agent)  Registration No. (Altomey/Agent)	00/11/17									
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  -20 =	Each independent claim over 3 (including Reissues)									
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 (round up to a whole number) x =   4. OTHER FEE(S) Fees Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00 1251 Extension for response within first month 120.00  SUBMITTED BY  Registration No. (Altomey/Agent) 32,881 Telephone (703) 205-8000	Multiple dependent claims					360				
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)	Total Claims Extra Claims Fee (\$) Fee P				aid (\$) Multiple Dependent Claim			lent Claims		
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	20 = x =					Fee	: (\$)	Fee Paid (\$)		
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  - 100 =	Indep. Claims Extra	Claims F	Fee (\$) Fe	ee Pai	id (\$)				-	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	-3= x =									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 =	3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50.									
Total Sheets Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)	sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
A. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filting surcharge): 1801 Request for continued examination (RCE) (see 37 790.00  1251 Extension for response within first month 120.00  SUBMITTED BY  Signature  Registration No. (Attorney/Agent) 32,881 Telephone (703) 205-8000	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00  1251 Extension for response within first month 120.00  SUBMITTED BY  Signature  Registration No. (Attorney/Agent) 32,881 Telephone (703) 205-8000										
1251 Extension for response within first month 120.00  SUBMITTED BY  Registration No. (Attorney/Agent) 32,881 Telephone (703) 205-8000	Non-English Specification, \$130 fee (no small entity discount)									
SUBMITTED BY  Registration No. (Attorney/Agent) 32,881 Telephone (703) 205-8000										
Registration No. (Attorney/Agent) 32,881 Telephone (703) 205-8000		$\frac{1}{2}$	201 Extension for	resp	onse within fir	st month		120	.00	
(Attomey/Agent) 52,661 Telephone (703) 205-6000	SUBMITTED BY	///	/				T			
Name (Print/Type) John W. Bailey Date September 13, 2005	Signature	Muc	12-			32,881	Telephone	(703) 205-8000		
	Name (Print/Type) John W. I	Bailey					Date :	September 1	3, 2005	